PTO/SB/05 (07-03)

Approved for use through 07/31/2003. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	
First Inventor	FLORENCIO CABRERA
Title	AC POWER SOURCE LUIN
Evenes Mail Lahel No	ED210661162115

PTO 6	
4309	8/03
17858	80

1. Fee Transmittal Form (e.g., PTC/SB/17) Submit an original and a duplicate for fee processing! Applicant claims small entity status. See 37 CFR 1.27 Specification Descriptive tills of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, But the status of the blook of the state of the blook of the b	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450						
5. Oath or Declaration a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) copy from a prior application (37 CFR 1.63(d)) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Powisional Continuation-In-part (CIP) of prior application No.:	Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s))						
14. Return Receipt Postcard (MPEP 503) 14. Return Receipt Postcard (MPEP 503) 15. DELETION OF INVENTOR(S) 15. Gardinard attached deleting inventor(s) 15. Certified Copy of Priority Document(s) 16. Monpublication Request under 35 U.S.C. 122 (b)(2)(8)(i). Applicant must attach form PTO/SB/35 17. Other. 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.78: Continuation Delow information: Examiner For Continuation Polysional Continuation and is hereby incorporated by reference. At Unit. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS City New York State New York State New York Telephone 21 + 742 721 Fax Telephone 21	5. Oath or Declaration [Total Sheets 55] a. Newly executed (original or copy)	(when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Date Sheet under 37 CFR 1.76: Continuation Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR Correspondence address below Name FLORANCIO CARRERA Address City NEW YORK State NY Zip Code COZU Fax Telephone 17. DATE TO SENSE TO SEN	i. DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (If foreign priority is claimed)						
Specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Continuation Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 56, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR Correspondence address below Name FLORACIO CABRERA Address City NEW YORK State NY Zip Code COZY Telephone 717 742 9711 Fax	1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other.						
Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR Correspondence address below Name FLORENCIO CABRERA Address City New York State VY Zip Code COZU Country State VY Telephone 11 742 921 Fax	18. If a CONTINUING APPLICATION, check appropriate box, and supposition following the title, or in an Application Data Sheet under 3	oply the requisite information below and in the first sentence of the B7 CFR 1.76:						
For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number. OR Correspondence address below Name FLORACIO CABRERA Address City New York State NY Zip Code COZY Country USA Telephone 917 742 921 Fax	Continuation Divisional Continu	ation-in-part (CIP) of prior application No.:						
Customer Number: OR Correspondence address below Name FLORENCIO CABRERA Address IOI WEST 80'W STREET # IOR City NEW YORK State NY Zip Code 100ZY Country USA Telephone 917 742 9211 Fax	For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box							
Name FLORAUCIO CABRERA Address IOI WEST SOM STREET # IOR City New York State NY Zip Code 100ZY Country USA Telephone 917 74Z 9ZI Fax	19. CORRESPON							
Address 101 WEST 80 W STREET # 10B City NEW YORK State NY Zip Code 10024 Country USA Telephone 917 742 9211 Fax	Customer Number.	OR Correspondence address below						
Address City New York State NY Zip Code QOZY Country USA Telephone 917 742 9211 Fax	1 SECOCIO CHURCKA							
Country USA Telephone 917 742 9711 Fax		37 # 10B						
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Signature Date 8/18/03	Name (Print/Type) FLORDUCIO CARREA Signature	Date D -2						

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file and by the USPTO to process? an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

TET TO ALIONATIA	Gomplete if Known			
FEE TRANSMITTAL	Application Number			
f TV 0000	Filing Date	E003 ,81 TRUDUA		
for FY 2003	First Named Inventor	FLORENCIO CABRERA		
Heclive 01/01/2003. Patent feas are subject to annual revision.	Examiner Name			
plicant dalms small entity status. See 37 CFR 1.27	Art Unit			
AMOUNT OF PAYMENT (S) 384	Attorney Docket No.			

TOTAL AMOUNT OF PAYMENT (\$) 384		Attorn	ey Doc	ket N	0.	
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check Credit card Money Other None			ONAL		S	
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Deposit Account:	Fcc Code	Fee (\$)	Pee P Code (ee (\$)	Fee Description Fee Paid	
Account 1		130	2051	65	Surcharge - late filing fee or oath	
Number Deposit Account		50	2052		Surcharge - late provisional filing fee or cover sheet	
Name	1053	130	1053	130	Non-English specification	
The Director Is authorized to: (check all that apply)	1812	2,520	1812 2	,620	For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) during the pendoncy of this application	1804	920*	1804	920°	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805 4		Requesting publication of SIR after	
to the above-identified deposit account.	1600	1,040	1000	,040	Exeminer action	
FEE CALCULATION	1251	110	2251	55	Extension for raply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Parne Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month	
Code (\$) Code (\$) 1001-750 2001-375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filling fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402		Filing a brief in support of an appeal	
1004 750 2004 375 Reissue lifting fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,610	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375	1452	110	2452	55	Pelition to revive - unavoidable	
	1453	1,300	2453		Polition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2501) Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	470	2502		Design issue fee	
Total Claims 2 -20° = X 4 = 4	1503	630	2503		Plant issue fee	
Claims	1460	130	1460	130	Petitions to the Commissioner	
Multiple Dependent	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee F	1806	180	1808	180) Submission of Information Disclosure Stml	
Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment par property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission after final rejection (37 GFR 1.129(a))	
1201 84 2201 42 Independent claims in excess of 3 1203 260 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be	
1204 84 2204 42 ** Reissue independent claims over original patent	180	750	2801	374	examined (37 CFR 1.129(b)) S Request for Continued Examination (RCE)	
1205 18 2205 9 "Relesue dalma in excess of 20 and over original palent	1802			900		
2011		Other (ee (specify)				
SUBTOTAL (2) (5) SSQ are number previously paid, if greater, For Reissues, see ebove		luoed b	y Basic F	Filing F	Fee Paid SUBTOTAL (3) (5) 384	
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SUBMITTED BY

Name (PrintType)

FORENCE CARREST Registration No. (Allgamen/Apen)

Signature

(Complete (Tepphrable)

Telephone 212 787 3504

Date 8 19 05

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